

TOWN OF GORHAM NEW HAMPSHIRE
APPLICATION TO ERECT/CHANGE A SIGN

Date: _____

Map & Lot # _____

Property Owner: _____

Phone: _____

Address: _____

Business Name: _____

City/State/Zip: _____

Total Number of Signs on Property: _____
(including this application)

Street Location of Sign: _____

Zone: _____

Sign Type: Wall Roof Projecting Free Standing

Permanent Temporary

Special Event: _____ Dates of the Event: _____

New Sign Reface Replace Existing (exact)

Sign Material: _____ Structure Material: _____

Message Area: Height _____ Width _____ Structure Height _____

Sign Message: _____

Method of Illumination: _____

Number of Faces of Sign: _____

PROPERTY SKETCH

Distance Rear _____

Distance Left _____ Distance Right _____

Distance Front _____

Sketch of Proposed Sign

Note: A sketch of the proposed sign and its structure, plus a general plot plan showing the location of the proposed sign and the location of any other signs on the property, any buildings and lot boundaries must be provided in the above two boxes.

Signature of Owner: _____ Date: _____

Signature of Erector: _____ Date: _____

Approved Permit # _____ Denied Referred to the Zoning Board or Planning Board

Reason for Referral: _____

If referred to ZBA or Planning Board please supply sign off from Chairman: _____

Code Officer: _____

Title: _____

Date: _____